

REPORT ID: WVFA70U0 STATE OF WEST VIRGINIA 05/14/19
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OFFICE OF THE STATE AUDITOR

EXPIRING FUNDS

BASKET ESSENTIAL

INVOICE COVER SHEET

AUDITOR ENTRY ID: I 4 13415560
WVFIMS DOCUMENT ID: I 13415560

*****C O M P L E T E D*****

STATE ORGANIZATION: 0307
STATE ORGANIZATION NAME: WV DEVELOPMENT OFFICE
ORGANIZATION CONTACT: CARL D. SMITH
ORGANIZATION ADDRESS: BLDG 6 ROOM 645

CHARLESTON WV 25305-0000
ORGANIZATION: 0307
ORGANIZATION NAME: WV DEVELOPMENT OFFICE

DATE PREPARED: 06/04/12
DOCUMENT AMOUNT: 550,000.00
VENDOR INVOICE NUMBER: 2012236
AGENCY COMMITMENT:
AGENCY DOCUMENT:

SPECIAL AUTHORIZATION: 4
OPEN END CONTRACT NUMBER:
DUE DATE: 06/04/12
SPECIAL HANDLING: N
VENDOR NUMBER: 558412
VENDOR NAME: OLD WHITE CHARITIES INC
VENDOR ADDRESS: 300 W MAIN ST

WHITE SULPHUR SPRING WV 24986-

CONTACT PERSON/PHONE: STEVEN MEESTER 304-957-2073 EXT:
CASH ADVANCE: N BEGIN TRAVEL: / / END TRAVEL: / /

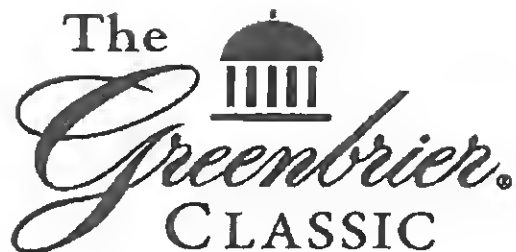
COMMENTS: GREENBRIER CLASSIC SPONSOR PAYMENT
JULY 2-8,2012

ELECTRONICALLY AUTHORIZED BY: DIANA SPENCE DATE:2012-06-04
HUMAN RESOURCE MANAGER

APPROVED BY AUDITOR: _____ DATE: _____

FUND	FY	ORG	ACT	OBJ	GRANT	AMOUNT
3171	2012	0307	099	035		550,000.00


TOTAL INVOICE AMOUNT						550,000.00



State of West Virginia
C/O Keith Burdette

July 2 - July 8, 2012

I hereby certify that the
items listed hereon have
been received and approved
for payment

5/29/12 
Date Name

Invoice # 2012 - 236

Due

\$550,000.00

TOTAL DUE

\$550,000.00

Please make check payable to Old White Charities, Inc.
Please return one copy of invoice with remittance.

Jon Krakower, Sponsorship Sales Manager
The Greenbrier Classic
300 West Main Street
White Sulphur Springs, West Virginia 24986

THANK YOU.

State of West Virginia
Purchasing Division
AGREEMENT

Purchase Order # _____ WVFIMS Account # _____

TEAM Vendor # _____ WVFIMS Vendor # _____

I, Old White Charities, Inc., agree to perform the following services
for WV Development Office (Name and address) at The Greenbrier Resort, White Sulphur Springs
(Agency) (Location)
Presenting sponsorship of 2012 Greenbrier Classic Golf Tournament
(Detailed description of services to be performed)

Date(s) of Service: from April 1, 2012 to June 30, 2012
The rate of pay shall be \$550,000 per invoice not to exceed
\$ 550,000 for the entire term of the contract.

NOTE: Any anticipated travel must be incorporated into the vendor's fee. No travel will be reimbursed by the State and is the sole responsibility of the vendor. The following certification must be completed and signed if the vendor is a full-time employee of the State of West Virginia.

Please check the appropriate box below:

- ☒ I am not currently a full-time employee of the State of West Virginia;
☐ I am currently a full-time employee of the State of West Virginia (complete certification below).

It is hereby certified that the services to be performed under this agreement will not interfere with or detract from the full-time duties of the employee and the amount of annual compensation received by N/A (above named vendor) from the State of West Virginia for full-time employment during the current fiscal year will be \$ N/A. The vendor serves as N/A with the title of N/A, certified by _____
(Supervisor's Signature)

GENERAL TERMS AND CONDITIONS: The General Terms and Conditions for Purchase Order/Contract located on the Purchasing Division's website at <http://www.state.wv.us/admin/purchase/vrc/POTandC.pdf>, ("Terms and Conditions") are hereby made a part of this agreement and are specifically incorporated herein by reference. By signing this agreement, Vendor certifies that it has reviewed the Terms and Conditions, fully understands them, and agrees to be bound by their provisions.

APPROVED BY:Agency West Virginia Development Office

[Signature]
(Authorized Signature of Agency)
Executive Director
(Title)
05/17/2012
(Date)

Vendor Old White Charities, Inc.

[Signature]
(Vendor's Signature)
[Signature]
(Social Security or FEIN)
05-14-2012
(Date)